

Application for Graduation

Full Legal Name:	PHC ID:	
Current Contact Information		
Address:		*ATTENTION:
Phone:		Student is required to submit a cap and gown
Email:		purchase order to the Bookstore prior to submitting this form to the Registrar.
Diploma and Program Information Name printed exactly as you want it to appear on your diploma:		Any student <i>not</i> participating in Commencement may skip this step.
Hometown to be listed on the Commencement Program:		Bookstore use only: Student has satisfied the requirement. Initials: Date:
Degree Information	l	
Anticipated Completion and Diploma Date: December,	_	August,
Major Program (and Track):		
Second Major (if applicable):		
Minor Program:		
Catalog Year:		
Commencement Information		
I participated in a previous Commencement Ceremony.		
☐ I do not wish to participate in the Commencement Ceremony. I will subs	mit a Diplom	na Release form to the Office of the Registrar.
$\hfill \square$ I wish to participate in the Commencement Ceremony in $\hfill \square$ December,	(Year)	May,(Year)
Signature:		Date Submitted: